

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

15 JUL 15 PM 3:39

Office Use Only

12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

Bob Corker for Senate 2018, Inc.

ADDRESS (number and street)

1015 Stonebridge Park Drive

Check if different
than previously
reported. (ACC)

Franklin

TN

37069

2. FEC IDENTIFICATION NUMBER ▼

C C00430462

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
-
- REPORT

NEW
(N)

OR

AMENDED
(A)

TN

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

- (c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2015M M / D D / Y Y Y Y
01 / 01 / 2015M M / D D / Y Y Y Y
01 / 01 / 2015

through

M M / D D / Y Y Y Y
03 / 31 / 2015M M / D D / Y Y Y Y
03 / 31 / 2015M M / D D / Y Y Y Y
03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kimberly Kaegi

Signature of Treasurer

Date

M M / D D / Y Y Y Y
7 / 11 / 2015M M / D D / Y Y Y Y
7 / 11 / 2015M M / D D / Y Y Y Y
7 / 11 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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